

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005358

FILED
Mar 12, 2009
Secretary of State

Entity Name: RINGGOLD, INC.

Current Principal Place of Business:

15556 NW OAK HILLS DR
BEAVERTON, OR 97006

New Principal Place of Business:

Current Mailing Address:

15556 NW OAK HILLS DR
BEAVERTON, OR 97006

New Mailing Address:

BOX 368
BEAVERTON, OR 97075 03

FEI Number: 20-0306445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, HELEN
3558 N CITRUS AVE
CRYSTAL RIVER, FL 34438 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CCEO () Delete
Name: SHOFFNER, RALPH DR
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

Title: DP () Delete
Name: CHVATAL, DONALD P
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

Title: D () Delete
Name: EVANS, PETER W
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

Title: ST () Delete
Name: HENDERSON, HELEN
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

Title: DV () Delete
Name: HENDERSON, HELEN
Address: 3558 N CITRUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34438

Title: D (X) Delete
Name: LEAMY, CHARLES C
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change () Addition
Name: SHOFFNER, RALPH DR
Address: 15556 NW OAK HILLS DR
City-St-Zip: BEAVERTON, OR 97006

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: HENDERSON, HELEN
Address: 3558 N CITRUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34438

Title: D (X) Change () Addition
Name: LEAMY, CHARLES C
Address: 3558 N CITRUS AVE
City-St-Zip: CRYSTAL RIVER, FL 34438

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH M. SHOFFNER

CEO

03/12/2009

Electronic Signature of Signing Officer or Director

Date